ELECTRONICALLY FILED ON: February 21, 2006

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006					Docket Number (Optional) 32344-701.201	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).))						
Application Number: 10/694,149 File				Filed: October 27, 2003		
For: Intestinal Bypass Device To Treat Obesity						
Art Unit: 3738			Examiner: William H. Matthews			
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.						
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):						
	_		Fee		ntity Fee	
		One Month (37 CFR 1.17(a)(1))	\$120	\$6	60 \$ <u>60.00</u>	
1		Two Month (37 CFR 1.17(a)(2))	\$450	\$2:		
		Third Month (37 CFR 1.17(a)(3))	\$1020	\$5		
l		Four Month (37 CFR 1.17(a)(4))	\$1590	\$79	95	
		Five Month (37 CFR 1.17(a)(5))	\$2160	\$10	80	
⊠	Applicant claims small entity status. See 37 CFR 1.27.					
	A check in the amount of the fee is enclosed.					
	Payment by credit card. Form PTO-2038 is attached.					
	The Director has already been authorized to charge fees in this application to a Deposit Account.					
⊠	The director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23-2415</u> . I have enclosed a duplicate copy of this sheet.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
I am the applicant/inventor.						
☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).						
☐ attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34						
February 21, 2006						
Signafure Date						
James R. Shay (650) 493-9300 Typed or printed name Telephone Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
☐ Total of 1 forms are submitted.						

This collection of Information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including agriering, presing, and submitting the completed application from the USPTO. This way vary depending upon the infoldulation case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this borden, should be sent to the Chief Information Officer. U.S. Patient and Timebrane YORGE, U.S. Opportunited (Commence, P.O., 450, Absorbadie, VA 2213-1450). O NOT CEND PEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O., Box 1490, Absorbadie, VA 2213-1450.

If you need a satistance in completing the form, and I 4000-PD-1999 and select option 2.